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Complete if Known Substitute for form 1449/PTO Application Number 09/534,836-Conf. #2620 INFORMATION DISCLOSURE March 24, 2000 Filing Date STATEMENT BY APPLICANT First Named Inventor C. A. Neff 3621 Art Unit (Use as many she ets as necessary) A. J. Fischer Examiner Name 657658004US 2 Attorney Docket Number 1 Sheet

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Examiner	04-	Document Number	Publication Date	Name of Patentee or	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear
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Examiner Initials	Cite No.1	Include name of the author (in CAPITAL LETTERS), title of the article (when appropriate), title of the item (book, magazine, journ al, serial, symposium, catalog, etc.), date, page(s), volume-issue number(s), publisher, city and/or country where published.	e of sue T ²	
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